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A WILDERNESS AND ART THERAPY PROGRAM FOR CHILDREN WITH SOCIAL
CONCERNS

ASHLYNN WARDLE

HONORS PROJECT

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About Children with Social Concerns

Children have a variety of different needs and abilities. Some children may have additional needs concerning social interactions. Having trouble understanding social exchanges, it may be hard for people with social concerns to predict the impact, influences, and consequences of their interactions (Wiley, Gentry, & Torres-Feliciano, 2016, p.8). These children may take part in a social situation without knowing the unwritten rules of social interactions or that they are even involving themselves in social setting (Wiley et al., 2016, p.44). These social skill deficits could get children in trouble. However, social skills should not be viewed just as behaviors that keep children out of trouble, but as skills that help children build social relationships (Bellini, 2008, p. 3). Elliott, Racine, & Busses (1995) found that when children acquire the skills needed for socially acceptable behaviors, they learn how to relate with other people having positive results while working to avoid negative interactions (as cited in Bellini, 2008, p. 3).

Children diagnosed with autism spectrum disorder (ASD), attention-deficit hyperactivity disorder (ADHD), learning disabilities, hearing impairments, language disorders, and other disabilities often have social concerns (Wiley et al., 2016, p.2). Additionally, children without a diagnosis may struggle with social interactions as well. While children with ASD have social concerns due to neurological causes, many other children have social skills impairments due to emotional or behavioral reasons (Epp, 2008, p. 29). No matter the cause, social concerns could lead to obstacles for children affected such as being bullied and rejected by their peers (Wiley et al., 2016, p.8). Bellini (2004), La Greca and Lopez (1998), and Tantam (2000) have found that his social failure could lead to anxiety, depression, substance abuse, and other forms of psychopathology (as cited in Bellini, 2008, p. 5). Many children with Asperger syndrome almost constantly have stress and anxiety (Kim, Szatmari, Bryson, Streiner, & Wilson, 2000; Myles & Southwick, 1999 as cited in Baker & Myles, 2003, p. 13). This stress and anxiety can stem from confusion about daily events, new situations, and concerns over many things neurotypical people consider unimportant (Baker & Myles, 2003, p. 13-14). In addition to constant stress and anxiety, people with social skills impairments may have low self-esteem (Ghaziuddin, Ghaziuddin, & Greden, 2002 as cited in Wiley et al., 2016, p.8).

Identifying Social Skills

Social deficits can have a strong effect on children. Many children who have social concerns want to create important relationship. To support these children in their goals and help them become socially successful, these social skills have to be taught. Social skills are not the same as academic skills. While some social behaviors may be successful for individuals, they may not always be appropriate. Also, different environments may cause children to alter their behavior (Bellini, 2008, p. 12-15). In order to teach children how to interact socially, the aspects of successful, appropriate social skills must first be identified. Children may have social concerns across a variety of skills. One area that might be affected is communication skills. Baker & Myles (2003, p. 23-25) divided communication skills into three different categories; conversational skills, cooperative play skills, and friendship management.

Conversational skills include:

- Appropriate personal space
- Positioning in a conversation
- Tone of voice
- Greetings
- How and when to interrupt
- Keeping to the topic
- Holding a conversation
- Turn taking in discussions
- Asking a question when confused
- Initiating a conversation
- Joining a conversation
- Ending a conversation
- Saying I don't know
- Introducing yourself
- Getting to know someone new
- Introducing topics of interests to others
- Giving background information about a discussion
- Changing topics
- Not talking too long
- Sensitive topics
- Complimenting others
- Using your HEAD (Happy voice, Eye contact, Alternating turns, Distance)
- TGIF (Timing, Greeting, Initial Questions, Follow-up questions)

Cooperative play skills include:

- Asking someone to play
- Joining others in play
- Compromising
- Sharing
- Taking turns
- Playing a game
- Dealing with losing
- Dealing with winning
- Ending a play activity

Friendship management skills include:

- Knowing informal and formal behavior
- Respecting personal boundaries
- The difference between fact and opinion
- Respecting others' opinions
- Sharing a friend
- Getting attention in positive ways
- Don't be rule police
- Offering help
- When to tell on someone
- Modesty
- Asking someone on a date
- Appropriate touch
- Dealing with peer pressure
- Dealing with rumors
- Calling on the phone
- Answering a phone call

Additionally, Baker & Myles (2003, p. 23-25) identify emotional management skills into three categories including self-regulation, empathy, and conflict management. Self-regulation skills include:

- Recognizing feelings
- Feelings thermometer
- Keeping calm
- Problem solving
- Talking to others when upset
- Dealing with family problems
- Understanding anger
- Dealing with making a mistake
- Trying when work is hard
- Trying something new

Empathy skills include:

- Showing understanding for other's feeling – based on ages
- Cheering up a friend

Conflict management skills include:

- Asserting yourself
- Accepting no for an answer
- Dealing with teasing (across age)
- Dealing with being left out
- Avoiding being set up
- Giving criticism in a positive way
- Accepting criticism
- Having a respectful attitude

Many of these social skill deficits stem from young children having trouble comprehending others thoughts, feelings, and emotional states. Additionally these children may have trouble controlling their emotions. Without understanding these factors, it may hard to children to match behaviors with desired outcomes. Also, they may not be able to apply what they know about social skills into their own lives (Wiley et al., 2016, p. 42). Wiley, Gentry, and Torres-Feliciano (2016) suggest learning skills similar those suggested by Baker and Myles including identifying emotions, recognizing others' emotions, and matching emotions to situations. Wiley et al. (2016) suggests several other skills sets to be learned such as polite manners, trying new things, making choices, and social conversations. Additionally skills for school like active listening, following for directions, and asking for assistance can be helpful. Introducing oneself, starting a conversation, ending a conversation, and learning to share can be useful of making and keeping friends. Building onto learning about friendship, learning what constitutes a good friend, how to be a good friend and maintaining a friend can be helpful too. Sportsmanship is another skill set identified to be learned including asking to play, taking turns, and learning to win, lose, and compromise.

While these are very similar to the skills pointed out by Baker and Myles, other skill sets are absent from their listed skills. For example, understanding figurative language can be very challenging for individuals with social concern especially children with autism. Teaching children about understanding idioms and different expression and how to use these expressions can help with this confusion.(Wiley et al., 2016, p. 100). Church, Alisanski, and Amanullah (2000) also mention that while discussing different language uses allegories, making inferences, and rhetorical questions are crucial for social skills (as cited in Baker and Myles, 2003, p. 13). Some children may also need assistance understanding jokes and humor (Bellini, 2008, p. 43).

Additionally, there are other forgotten factors that come into play concerning social situations. For example, personal hygiene could be discussed. Children should learn about how hygiene may affect their social interactions discussing first impressions, what is considered gross, and how germs are spread (Wiley et al., 2016, pg. 108). Additionally, children should be aware of strangers. They should learn that while not all strangers are bad people, you can't tell if they are bad by just seeing them. Skills include learning who qualifies as a stranger and what is considered appropriate and inappropriate touching (Wiley et al., 2016, pg. 170). With all these in mind it is important to not leave out some nonverbal communication skills too. These include facial expression use and recognition, matching facial expression to emotions, nonverbal cue recognition, gesture use, and body language (Bellini, 2008, p. 11-38).

Creating a Successful Program

Identifying skills is just one part of creating a successful program. There are more interrelated factors that determine how a program might run related to its design. One thing to consider is its duration and frequency. To see progress from a program it may take 12 to 24 weeks. The frequency of meeting during these weeks is important too. Concerning frequency, Wiley et al. (2016) suggest that children meet at least once a week for thirty minutes and no more than 120 minutes per session. Implementing these meetings, it is important to consider whether children will benefit from a group or individual therapy. Groups can create social support systems that can prevent or rid of stress from unsuccessful peer interactions helping to build social relationships (Bellini, 2008, p. 5). Additionally, social groups may help to grow and improve interpersonal skills and thinking about social situations (Wiley et al., 2016 pg. 9). Children can be placed into groups of individual settings based only language ability and level of attentiveness. Individuals with high attentiveness may be ready for group sessions while individuals with low attentiveness may be better off in individual settings unless they can be redirected. Additionally, groups should not include large gaps in age or language skills (Baker & Myles, 2003, p. 17 – 20). Finally, the setting of social skills program can be important. Bellini (2008) explains it is best to teach skills in different settings.

Deciding these factors of the program, it is also important to decide how the intervention itself will run. Bellini (2008, p. 8) created a five step model to design a successful program. First, children should go through some type of assessment to determine their social skills. Baker & Myles (2003) suggest ranking behaviors by frequency of use. Secondly, skills acquired and issues with performance should be considered. Some children may already be aware of the skills, but are not executing these skills. Next, interventions should be selected to help acquire skills or improve performance. Then, this is intervention should be implemented. Finally, the child should be evaluated and monitored for progress.

While this creates the foundation of the program, it still needs to be successfully implemented. There are many different concepts to consider while implementing this program. First, cultural differences need to be considered during all parts of the program (Wiley et al., 2016, p. 3). Cultural differences may affect the way an individual interacts and communicates with others. All cultures should be respected throughout the entire program. how the interventions are selected may also influence program success. Quinn, Kavale, Mathur, Rutherford, and Forness (1999) found programs that focus on skills like taking turns were more successful than those that were directed at overall social concepts like cooperation or friendship (as cited in Bellini, 2008, p. 6). Additionally, Epp (2008) found that behavior and cognitive training, social stories, and chunking are some strategies that may help children with social

concerns. Including activities with movement may help allow children learn to perform the actions (Bellini, 2008, p. 32). Studies from 2000 to 2009 showed social skills interventions for children around school-age were most successful when they were in a natural setting, with accepting peers, program were developmentally targeted, and programs were structured towards individuals interests, assets, and learning styles (Schreiber, 2009, p. 4).

While all these factors matter, it is crucial to work towards generalization in while teaching these skills (Wiley et al., 2016, p. 9). Moreover, it is import to tailor the program to the child and their needs. The program should fit the child, the child should not be forced to fit the program (Bellini, 2008, p.6) To successfully do this considering the child's strengths and weaknesses can help assess what best suites them (Baker & Myles, 2003, p. 10).

Wilderness and Art Therapy Program Design

This program outline will take place over a 15 week period. Sessions vary in time sessions with a majority of activities no exceeding two hour periods. The program is designed for therapy groups that meet weekly. For this program, Bellini's five step model will be followed.

First, children will be assessed. A social skills inventory will be filled out by guardians and/or other people who often interact with the child. These inventories focus on the frequency of the child's behavior and will not be compared to norms. This helps to focus the program on the child themselves. It can help to ensure that children are improving their own behavior and reaching goals rather than trying compare to a previously determined norm. The inventory also questions if the child is familiar with the skill. This can be used to help determine if they need to learn a new skill or have learned the skill and are need support utilizing it. Additionally the person who fills out the form has space to leave additional comments and suggest three goals for the child in there. While a therapist may be an expert in their field, guardians and those who work closely with the children are often "experts" on the children. This insight can be extremely insightful when considering goals. Taking in adult opinions for consideration, it is also important to consider what the child wants. They will fill out a self-assessment allowing them to reflect on their social skills and share their strengths and weaknesses. This gives insight on how the child views themselves and includes them in the process. This form may have to be read to the child or adapted in other ways to make it age appropriate and effective in gathering the child's perspective.

Considering both all these different aspects and the child's needs, an intervention can be designed. Wilderness and art therapy activities will be selected to address social skills. Additionally, this program will target some of other factors children with social concerns may have like anxiety, stress, and anxiety management. Also, the program will focus on supporting individuals and focusing on their self-esteem. Interventions should focus on being more skill based. All skill specific behavioral interventions will follow the DESCRIBE IT model. This plan includes the follow steps; Define a skill to be learned, plans an Elect reliable way to measure the skill, Summarize the baseline data, Calibrate a goal, Recommend a research-based intervention, Implement intervention thoroughly, Begin progress monitoring, Evaluate effective needs of the intervention, Intensify the intervention as needed, and then Talk with colleagues concerning the intervention (Vostal, Messenheimer, Hampton, & Keyes 2014, p. 5).

These interventions should include helpful factors such movement, behavior and cognitive training, social stories, and chunking. With a variety of diverse activities and opportunities available using wilderness and art therapy, different settings and activities can help to generalize skills. While this is an outline of a program, it is flexible enough that is could be altered to fit individual circumstances and needs.

Date: _____

Child's name: _____ Age: ____ Diagnosis: _____

Individual filling out the form: _____ Relationship to child: _____

Social Skills Inventory

Rank each skill from 1 to 5 based on frequency of appropriate use with 1 being often and 5 being rarely. Mark Y if the child has been taught this skill before in the awareness column or N if they have not been taught this skill. List any other information about the child's understanding and ability to perform the skill in the comments column.

Discussion/Conversational Skills

Skills	Frequency	Awareness	Comments
Greetings			
Getting to know someone new			
Introducing yourself			
Initiating a conversation			
Joining a conversation			
Ending a conversation			
Tone of voice			
Appropriate personal space			
Appropriate vs. inappropriate touching			
Holding a conversation			
Turn taking in discussions			
Not talking too long			
Keeping to the topic			
Changing topics			
Sensitive topics			
Introducing topics of interests to others			
Giving background information about a discussion			
Asking a question when confused			
Saying I don't know			
How and when to interrupt			
Active listening			
Using manners			
Recognizing nonverbal			
Gesture use			
Understanding body language			
Personal hygiene			

Cooperative Play Skills

Skills	Frequency	Awareness	Comments
Playing a game			
Asking someone to play			
Joining others in play			
Sharing			
Taking turns			
Learning to win			
Learning to lose			
Compromising			
Ending a play activity			

Friendship Management Skills

Skills	Frequency	Awareness	Comments
Knowing formal and informal behavior			
Respecting personal boundaries			
Sharing a friend			
Getting attention in positive ways			
Modesty			
Offering help			
Complimenting others			
When to tell on someone			
Dealing with peer pressure			
Dealing with rumors/teasing			
Dealing with being left out			
What is a good friend			
How to be a good friend			
Awareness of strangers			

Emotional Management Skills

Skills	Frequency	Awareness	Comments
Identifying feelings and emotions			
Understanding intensity of feelings			
Matching emotions to situations			
Showing understanding for other's feelings			
Cheering up a friend			
Recognizing others emotions			
Talking to others when upset			
Problem solving			
Dealing with family problems			
Dealing with making a mistake			
Trying when work is hard			
Trying something new			
Relaxation and remaining calm			

Conflict Management Skills

Skills	Frequency	Awareness	Comments
Asserting yourself			
Accepting no for answer			
The difference between fact and opinion			
Respecting others opinions			
Avoiding being set up			
Giving criticism in a positive way			
Making choices			
Following directions			

Figurative Language Skills

Skills	Frequency	Awareness	Comments
Understand idioms			
Use idioms			
Comprehending common expressions			
Using expressions			
Understanding allegories			
Making inferences			
Understanding rhetorical questions			
Using rhetorical questions			
Comprehending jokes			
Telling jokes			
Understanding humor			

Please list three goals for the child in therapy:

1)

2)

3)

Additional skills that may need addressed:

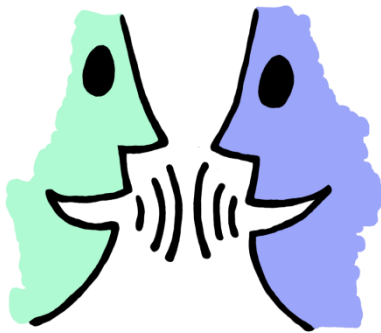
Any other comments:

Name: _____

Date: _____

Social Skills Self-Assessment

Answer and color in the stars for each question. (Scale for stars below)



How do you do when talking to others?

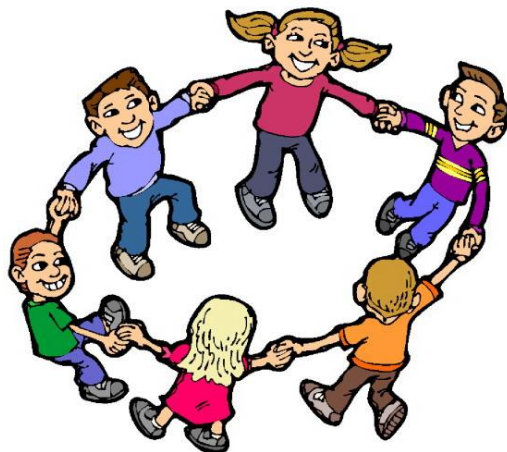


What do you do well when talking?

How do you do when playing with others?



What do you do well when playing?



How are you at making friends?



How are you at keeping friends?

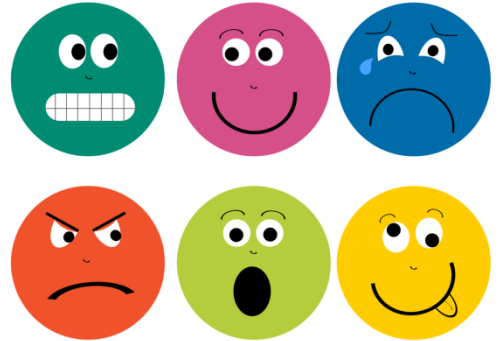


How can you be a good friend?

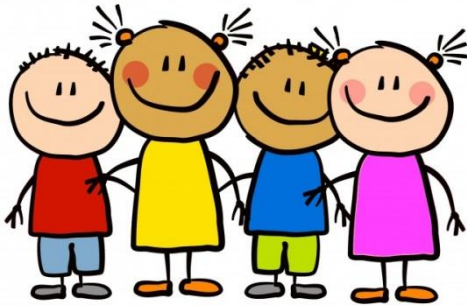
How well do you understand your emotions?



How do you feel about receiving therapy?



What is something you want to practice in therapy?



Child's name: _____

Date: _____

Intervention Monitoring Sheet

Therapist or other professional will check for the monitor the frequency of each behavior using the charts below. Appropriate uses and inappropriate uses will be monitored to track to determine how the child is performing. These results will be observed to determine a child's progress.

Discussion/Conversational Skills

Skills	Appropriate Uses	Inappropriate Uses
Greetings		
Getting to know someone new		
Introducing yourself		
Initiating a conversation		
Joining a conversation		
Ending a conversation		
Tone of voice		
Appropriate personal space		
Appropriate vs. inappropriate touching		
Holding a conversation		
Turn taking in discussions		
Not talking too long		
Keeping to the topic		
Changing topics		
Sensitive topics		
Introducing topics of interests to others		
Giving background information about a discussion		
Asking a question when confused		
Saying I don't know		
How and when to interrupt		
Active listening		
Using manners		
Recognizing nonverbal		
Gesture use		
Understanding body language		
Personal hygiene		

Cooperative Play Skills

Skills	Appropriate Uses	Inappropriate Uses
Playing a game		
Asking someone to play		
Joining others in play		
Sharing		
Taking turns		
Learning to win		
Learning to lose		
Compromising		
Ending a play activity		

Friendship Management Skills

Skills	Appropriate Uses	Inappropriate Uses
Knowing formal and informal behavior		
Respecting personal boundaries		
Sharing a friend		
Getting attention in positive ways		
Modesty		
Offering help		
Complimenting others		
When to tell on someone		
Dealing with peer pressure		
Dealing with rumors/teasing		
Dealing with being left out		
What is a good friend		
How to be a good friend		
Awareness of strangers		

Emotional Management Skills

Skills	Appropriate Uses	Inappropriate Uses
Identifying feelings and emotions		
Understanding intensity of feelings		
Matching emotions to situations		
Showing understanding for other's feelings		
Cheering up a friend		
Recognizing others emotions		
Talking to others when upset		
Problem solving		
Dealing with family problems		
Dealing with making a mistake		
Trying when work is hard		
Trying something new		
Relaxation and remaining calm		

Conflict Management Skills

Skills	Frequency	Awareness
Asserting yourself		
Accepting no for answer		
The difference between fact and opinion		
Respecting others opinions		
Avoiding being set up		
Giving criticism in a positive way		
Making choices		
Following directions		

Figurative Language Skills

Skills	Appropriate Uses	Inappropriate Uses
Understand idioms		
Use idioms		
Comprehending common expressions		
Using expressions		
Understanding allegories		
Making inferences		
Understanding rhetorical questions		
Using rhetorical questions		
Comprehending jokes		
Telling jokes		
Understanding humor		

Other Behaviors

Skills	Appropriate Uses	Inappropriate Uses

Comments:

Displayed/discussed anxiety, stress, or emotional distress:

About Wilderness Therapy

Biophilia is the idea the humans have an essential inherent need to connect with nature (Kellert and Wilson, 1993; Wilson, 1984, 1993 as cited in Kahn and Stephen, 2002, p. 1). This desire to interact with nature can be related back to psychological instincts. Psycho-evolutionary theory suggests through adapting for survival in nature, humans now have positive emotional experiences when in nature or dealing with nature (Ulrich, Simons, and Losito, 1991 as cited in Söderback, Söderström, and Schäländer, 2004, p. 248). There are many ways people may make this connection with nature. Kellert (1996) explained this involvement with nature may be through a direct experience, in an actual nature setting, an indirect experience, in a setting with real experiences with some limitations such as a zoo, or a vicarious experience where there is no actual physical interact with nature (as cited in Kahn and Stephen, 2002, p. 118-119). Common wilderness therapy activities are often direct experiences and include backpacking, canoeing, riding horses, rock climbing, or playing games outside. These programs offer therapy in unique settings allowing for different experiences than many traditional therapy settings.

Wilderness therapy programs have been around for some time now. Tent therapy took place at Manhattan State Hospital during the tuberculosis epidemic. Running out of space in the hospital, some of the psychiatric patients were placed on the lawn in tents. Their conditions dramatically improved and some were even discharged. However, this treatment did not continue after the epidemic (Schaefer, 1999, p. 164). Another wilderness therapy example was the Salesmanship Club Camp. This camp was designed for children with emotional concerns. The program was centered around using empathy, innovative listening, not judging others, providing emotional care, and making adaptations as needed (Smith 1958 as cited in Davis-Berman and Berman, 1994, p. 49 to 50). Other examples include Camp Ahmenk, University of Michigan Fresh Air Camp, and Outward Bound (Schaefer, 1999, p. 164). Ecotherapy programs have not been exclusively held in camp like settings where participants are involved with a direct experience with nature. Indirect and vicarious experiences have been used too. During the early 20th century, mental hospitals started using gardening as an intervention believing that exploring nature and visiting gardens can benefit people's health. Soon nature was used for therapeutic qualities in physical, occupation, and speech rehabilitation programs. In 1973, the National Council for Therapy and Rehabilitation accepted horticulture as a form of rehabilitation in the United States (Söderback et al., 2004, p. 247).

Research has been conducted to determine the effectiveness of these different programs. In outdoor settings changes happen at a quicker pace than in traditional therapy settings like a hospital (Berman and Anton, 1988 as cited in Davis-Berman and Berman, 1994, p. 9). Participants are often immersed in the therapy treatment all day. Also, participants often have more time to get used to their peer and the staff (Davis-Berman and Berman, 1994, p. 10). Many positive outcomes can result from this immersion itself. The outdoors can transform participants into a social group where learned skills can be shared through social learning and members can learn the behaviors of group members (Kahn and Stephen, 2002, p. 7-8). It is required for groups to work together and communicate as there are natural consequences for their actions (Davis-Berman and Berman, 1994 as cited in Schaefer, 1999, p. 166). Group member's behavior is followed by an immediate response from other members and impact on the group (Schaefer, 1999, p. 176). Camp Ahmek believed socialization would be helped because in a camp the group must learn to cooperate to be successful. Additionally, Camp Ahmek thought participants would experience peer pressure to meet the expectations set, could use camp counselors as role models, and the entire group of campers could act as a force to shape an individual's actions (Dimock and Hendry, 1939 as cited in Davis-Berman and Berman, 1994, p. 45). Finally, groups create the opportunity for individuals to overcome isolation and work on successful conflict management strategies (Davis-Berman and Berman, 1994 as cited in Schreiber, 2009, p. 64).

In addition to the immersion and group dynamic benefits, many other factors can be advantageous. A person's psychological status can be affected through wilderness therapy programs. Hans (2000) found most gains in wilderness programs are related to self-esteem and internal locus of control (Schreiber, 2009, p. 68). Cason and Gillis found internal locus of control, improved self-concept,

increased positive attitudes, and increased academic achievement from some programs (Schaefer, 1999, p. 168). Multiple studies have found that after taking part in wilderness therapy program undesired behaviors often decrease compared to those who do not take part in the program (Berman and Davis-Berman, 1989; Chernery, 1981; Krieger, 1973; Schinderman, 1974 as cited in Schaefer, 1999, p. 167). Outward Bound programs have been studied multiple times as well. It was been found that Outward Bound participants have seen changes and improvement concerning alienation, asocial behavior, aggression, social maladjustment, value orientation, assertion, self-esteem, and acceptance of others (Kelly and Baer, 1968; Clifford and Clifford, 1967; Smith, Gabriel, Schott, and Padia, 1975 as cited in Davis-Berman and Berman, 1999, p. 55-74). Among other wilderness therapy programs studies have shown increased self-esteem, coping ability, and self-efficacy comparing participants in ecotherapy programs and in control groups (Norris and Weinman, 1996; Kelly, Coursey, and Selby, 1997 as cited in Schaefer 1999, p. 168).

Wilderness therapy programs also offer specific benefits that can impact children with social concerns directly. One group of individuals with social concerns wilderness therapy could affect are those with behavioral disorders. Sachs and Miller found cooperation was improved especially in school with children with behavior disorders participating in wilderness therapy programs (as cited in Schaefer, p. 168). Also, a therapeutic gardening program was created for children with behavioral disorders who were hospitalized. Over five months, children participating in the supervised program increased their self-esteem (Williams and Mattson as cited in Söderback et al., 2004, 248-249). Some children with social concerns may anxiety as well. Koepke (1974) studied Outward Bound) measuring State-Trait Anxiety Inventory scores. Scores were lower after the experience and participants had improved self-concept (Davis-Berman and Berman, 1999, p. 74). Other patients in residential settings have found that being outdoors helped decrease anxiety and aggression (Söderback et al., 2004, p. 248).

Wilderness therapy could teach skills to many other individuals who may be involved in a social skills training program with specific diagnoses too. A wilderness setting may be beneficial to children with ADHD and other diagnoses. These children often have trouble concentrating on verbal communication and other traditional therapy methods, but can be more active in the wilderness (Schaefer, 1999, p. 169-170). These experiences in wilderness can be used as a metaphor for events and relationships in everyday life (Schaefer, 1999, p. 165). Wilderness therapy may help children diagnosed with autism too. A Japanese study showed that camping therapy improved behavior concerning children with autism that were 4 to 12 years old (Kobayashi and Murata, 1997 as cited in Schreiber, 2009, p. 6). As outdoor therapy programs are strongly based on activities, these may help children with autism involved in the programs as well. Programs such as LEGO therapy and video game interventions have improved socialization and helped social skills generalized for children with autism (Schreiber, 2009, p. 57-63). The group dynamics provide further benefits. Attwood (2000) explained it was useful to teach social skills in a group with other peers who have Asperger syndrome or high functioning autism (as cited in Schreiber, 2009, p. 5). Moreover, working in with ecotherapy, the least restrictive environment can more easily be created for all these participants (Davis-Berman and Berman, 1994, 138-164).

Creating a Successful Program

A successful wilderness therapy program has many components. First, it is important to make sure that the program is safe. Priest (1993) suggested that these programs should have higher levels of competence than risk (as cited in Davis-Berman and Berman, 1994, p. 13). Leaders of the programs should be well trained. Different adventure therapy designs may require professionals to receive additional training to ensure safety for participants. Risks should be assessed to determine what treatment is needed. Risk assessments should consider the populations involved in the program too. These may be thinking about physical risks but could also be emotional concern and the training of the leaders (Schaefer, 1999, p. 174-175). Goals and current status concerning teamwork, independence, physical challenges, prosocial behavior, and participant perceptions such as their acceptance of self and are important factors to consider (Schreiber, 2009, p. 152). Peele and Richards (2005) found that clients often

see levels of risk to be high when the actual level of risk is actually lower (as cited in Schreiber, 2009, p. 66). It is important to consider this when planning a therapy program. Nature and other wilderness experiences should facilitate therapy and not hinder it.

The trip should still be structured around individual goals and interventions. Traditional therapy concerns can be dealt with in a nature with the setting as the changed environment. Progress should be observed and tracked as in all therapy settings (Schaefer, 1999, p. 176). This may require leaders to be flexible with the activities. For example, if participants are too tired to take part in a group discussion at night the therapy session could be moved to after lunch time. Schaefer (1999) suggests that leader solves these issues at the beginning, but the group finds their own solutions as they develop. Berman and Anton (1988) and Davis-Berman and Berman (1989) found these group relations are best for adolescents who are depressed, have trouble connecting with others, or are very reserved (Schaefer, 1999, p. 171). With wilderness therapy groups can receive therapy while individuals are also able to receive one-on-one therapy as needed.

To support interventions outside of the wilderness setting there are a few other key elements to include in an ecotherapy program. One way to continue with a successful intervention is to offer programs and groups following the therapy session (Schaefer, 1999, p. 178). Also, it may be helpful to create something showing the changes during the program or have participants write about their experience so they can reflect upon it later (Schaefer, 1999, p. 178). Giving the participants skills they can use later may be helpful too. Horticultural therapy allows participants to get involved in an activity they may be able to use at home (Söderback et al., 2004, 245-246). In addition to occupational skills, it is extremely important to try to transfer they social and other skills they learned. This may be done through debriefing. This can be done in different ways such as group discussions or journaling. It allows for participants to understand and build on their learning (Schoel, Prouty, & Radcliffe, 1998 as cited in Schreiber, 2009, p. 64). Throughout the program, Schaefer (1999) suggest journaling about feelings, goals, social interactions, and how to apply what is learned in therapy in daily life. This can take place while those who are leading the trip record their notes and observations (Schaefer, 1999, p. 176).

About Art Therapy

Art can be used to help individuals get in touch with their surroundings and lives. Using art to relate to one's surroundings can be seen as early as prehistoric cave paintings (Speert, 2016, p. 1). The advantages of art to help individuals comprehend and interact with themselves and the surrounding work can be harnessed and used in art therapy sessions. Art therapy can allow for children to create art through difference mediums to aid in working towards therapeutic goals. It can easily be an important element of a multimodal treatment program (Jensen, 1999, as cited in Safran, 2002, p. 23). Art therapy allows for learning to be visual and interesting for participants. Also, it is flexible and enough for projects to be created to work on specific therapeutic goals (Martin, 2009, p. 65). Art therapy can work to develop self-awareness, enhance social skills, help with problem solving and behavior management, develop strategies for dealing with anxiety, and improve self-esteem (AATA, 1996, as cited in Safran, 2002 p. 43). Art can provide a multisensory learning experience utilizing fine and gross motor skills, auditory input, and other senses to help engage participants (Safran, 1999, p. 103). This experience is further supported by the visual record of the therapy sessions including different emotions and ideas (Safran, 1999, p. 23).

Art therapy can be very beneficial when working with children with social concerns. Children with social concerns such as autism may experience delays concerning artistic development. Selfe (1983) found children with autism may develop differently as artists in ways such as skipping drawing stages or choosing different subject matters (as cited in Martin, 2009, p. 49). Martin (2009) explains these differences may include different ways children force art to be completed by impulsively correcting aspects, paying an extreme amount of attention to detail, and grouping parts together. Additionally, Martin suggests that they may try to overly organize their art by using colors in a specific order, assigning things to certain colors, or cataloging through their artwork. While these may some be challenges children may have they may also have trouble with activities involving their imagination. Baron-Cohen and Scott

(2001) found children with autism had trouble with drawing assignments that involved imagination (as cited in Martin, 2009, p. 54). Sensory issues, self-expression, relating to others, and other concerns may be addressed in an art therapy setting too helping individuals with social concerns.

While all these concerns are addressed, art can directly aid in making sense of social situations. Many different activities can help children with different needs learn and develop. For example, drawing a frame of an action can help children to understand real-life situations (Martin, 2009, p. 76). Children could also illustrate a strategy that they may use to solve a problem (Safran, 1999, p. 91). Using the entire body while making art can be helpful for children with autism. This can be done through a variety of activities like body tracing, body painting, creating masks, or costumes. While this can be helpful many children may need support due to physical closeness and sensory concerns (Martin, 2009, p. 73). Group murals may aid with building social skills too. They require children to think of a theme and work collectively. Also, they can help to bring to attention impulsive behavior as it will affect the group's project (Safran, 1999, p. 116).

Strategies learned art therapy can help with continuing practice and support for children with different needs (Safran, 1999, p. 41). Social skills art therapy groups for children help to give therapists a view of the different needs and supports that fit the children personally (Safran 1999, p. 38). The activities can help to work on areas where children with social concerns can be aided. Safran (1999) explains art allows for the feelings of people with ADHD and other social concerns to be expressed visually when they may be reluctant to share feelings in other therapy settings. This visual expression gives the therapist insight and opportunity to question how children feel about their diagnosis, how their diagnosis affects them, how they feel about medication they may need to take, and if their diagnosis is affecting them in school or in other situations. Also, it allows the therapist to observe situations where they can see which group member takes the lead and which group member follows, who is forming relationships with others and who is isolated, and other behavioral observations giving the therapist insight on the children involved. Seeing drawings and art made by other children going through similar situation can introduce children to others with similar concerns and allow them to have someone to relate too (Safran, 1999, p. 62-76). This could help with the social isolation children with ADHD and other social concerns often have to face (Safran, 1999, p. 85).

Creating a Successful Program

Different aspects can be included to create a successful art therapy program. Including these factors can help for participants to get the best experiences and results possible from the therapy program. One of the most essential parts to a successful program is the activities and planning involved. Groups should be well organized for the program to be effective. Safran (1999) suggests trying to see children in their natural environment a few times before the therapy sessions. This can help to put children in groups considering their emotional and developmental age. Suggested ages for these groups are ages 4 to 7 and 7 to 10 or 11. Deciding groups based on these factors, each group should contain six to eight children. This helps limit possible distractions creating a more consistent environment.

In addition to planning groups, meetings and activities need to be planned. When planning activities it is important to consider it may take these groups seven or eight weeks to adjust to each other (Safran, 1999, p. 99). In addition, to the time it takes for groups to adjust, it is also important to look at the length of meetings. Safran (1999) suggests planning one hour meetings for children between ages 5 and 11. At these meetings a variety of activities can take place. Activities should be age-appropriate and developmentally appropriate (Martin, 2009, p. 75). Martin (2009) explains emotional skills, fine motor skills, sensory regulation, and other skills can be addressed through these activities. Projects can be personalized in order to target personal goals. Planning these activities it is important to keep a few things in mind. First, Leveck (1983) suggest that children under the age of 7 may feel threatened if their pictures are interpreted; McNeilly (1990) and Thomas and Silk (1990) suggest that interpreting picture can help older children better understand themselves (as cited in Safran, 1999, p. 108-109). Therefore, it is important to keep this in mind when planning analysis activities in sessions. Another important

consideration to be made when using art with children with social concerns is communication. Martin (2009) claims that drawing should not be used as the permanent alternative for language. Many different supports such as PECS cards, assistive technology, and other options can be used to develop language rather than depending on drawing which can be ineffective. Finally, Martin explains that the goal of art therapy should be to use a recreational activity that children find fun to help them generalize what they have learned into other environments. These goals can be support using a visual diary that can help with short and long term memory of sessions. Videotaping the group may allow them to watch of their behavior influences others around them too (Safran, 1999, p. 121-122).

After the activities are designed it is important to consider materials that will be used. Materials can be found anywhere and even come from the environment. Speert (2016) suggests that materials found in the environment can help with sensory needs and connection to the world around us. These supplies are also often very cost effective. Many other supplies can be purchased to support children with different needs. Martin (2009) shared that younger children find making art more important and the importance of the artwork itself is more important as children get older. Considering this it may be important to consider what quality and type of supplies are bought depending on the purpose the art making will serve. If artwork is going to be keep for a long time it may need supplies that have preservative qualities. If artwork is being done just for the sake of doing it, more affordable materials may be appropriate. All sessions should have material available for children to sign their name and date to keep a visual record of their sessions (Safran, 1999, p. 56). Some material may need to be adapted to suit children's needs too.

After planning, the sessions will finally take place. During sessions, the therapist needs to consider how they interact with the children themselves. Adults may work with child in art to help them experiment, aid with sensory needs, and work on their creativity (Martin, 2009, p. 30). Martin also suggests that therapists should be supportive and never discouraging. Children with autism or other social concerns may be more critical of their artwork than neurotypical children. Supporting the children may help them continue with their art and allow them to enjoy themselves. Some ways Martin suggests supporting children include making art with children serving as model and using adaptations as needed. Giving children step by step instructions can be helpful to make children finish their art, but they will not focus as much and a lot of the work will be completed by the therapist rather than by the child (Martin, 2009, p. 84-85). Martin also shares that using some visual support such as drawing part of the image, providing models, and giving instructions can help with the project. The choices of what to do during these sessions should be based on the strengths of the children. Strengths can be used to help improve goals based on deficits or concerns. It is important to remember that the goal of art therapy is to support the children. Producing professional artists is not the goal of an art therapy program. Working with these goals of supporting children, Quinn (2000) found that coaching can help to prevent predictable behavior concerns (as cited in Safran, 1999, p. 128). All these supports should take place in the least restrictive way in order to teach children the skills they need in the best possible way. Therapists should be respectful and flexible with children considering their needs, communication abilities, and any other important attributes they may have (Martin, 2009, p. 103-109).

Art and Wilderness Therapy Program

Week One Introduction Activity: Two Day Camping Trip

The program will begin with a two day camping trip. This program is designed for a group of six children with social concerns. The camping trip will serve as an introduction session for the 15 week art and wilderness therapy program. After this session, the group will meet once a week to continue building on skills and reinforcing what has been learned. During the trip the participants will focus on social skills as well as other concerns such as anxiety and self-confidence. Using the combination of recreational activities and the natural social influences of working in the group, this will create a natural setting where participants will develop social skills. The multiple natural settings used in the program will help participants generalize their social skills in the future.

Participants will stay at a base camp and participate in different activities each day. Staying in the base camp will allow participants to create a comfort zone hopefully relieving some anxiety about the trip. Camping participants will be able to learn different life skills that may influence their interactions such as hygiene. Also, it will allow for them to work in a community of people working towards similar goals.

Additionally, each different activity will allow participants to work towards their goals. These activities will include hiking and canoeing, Canoeing was selected due to the extended time working with a partner. This allows participants to learn compromising skills, team work skills, and communication skills. Also, it can create an opportunity for friendships to form. Hiking was chosen because it can be done collectively as a group allowing participants to practice skills with a variety of people. Hiking will support learning how to communicate effectively in a group enforcing skills such as taking turns in a conversation and initiating and ending conversations.

Camping will support individuals working towards their goals as well. There will be time for participants to get to know each other during camping. This downtime will allow for individual interventions to place as needed. These interventions would target social skills that may come up in conversation. During this down time there will also be time to reflect in journals. These reflections will be focused on different ideas such as what they have accomplished and learned in the day. If a participant is not able to write someone could write their journal for them or they could use a tape recorder to mark their progress.

Week 1 - Day 1: Canoeing

Time	Activity	Target Skills
8 AM	Meet at canoe site Introductions Activity: Participants will receive a sketchbook. In the sketchbook they will draw a picture of themselves to introduce themselves to the group. Then, they will write their name, three goals on the trip, and make a trail name for themselves. They will then share their name, their trail name, drawing, and one goal with the group. The sketchbook will act as journal for the rest of the program.	Introducing yourself, Introducing topics of interests to others
9 AM	Canoeing instruction: participants will learn how proper canoeing technique	Trying something new
10 AM	Canoe: Partners will be randomly selected and assigned. The participants will be canoeing with their partner until lunch.	Compromising, getting to know someone new, introducing topics of interests to others, holding a conversation
11 AM	Canoe	
12 PM	Lunch break: Get out of canoes and have lunch as group. Switch partners.	Taking turns in a discussion
1 PM	Canoe	Compromising, getting to know someone new, introducing topics of interests to others, holding a conversation
2 PM	Canoe	
3 PM	Return to campsite: Set up camp	Life skills (shelter and food/water)
4 PM	Prepare dinner	Hygiene, life skills (cooking), cooperation
5 PM	Eat dinner and clean up	Hygiene, cooperation
6 PM	Free time	Individual social skills interventions as needed
7 PM	Group discussion: Social Skills: Share with group either one social interaction that went well today or an interaction you are confused about. Explain why the interaction went that way. What skills are needed for positive interactions? Confidence: Share with the group one thing you accomplished and/or learned today.	All social skills, confidence
8 PM	Journaling/Drawing	Reflect on the discussion and the day
9 PM	Bed time	

Week 1 - Day 2: Hiking

Time	Activity	Target Skills
8 AM	Wake up/Get Ready Eat Breakfast	Hygiene
9 AM	Drive to trail and get ready to start the hike Explain trail etiquette	Respecting personal boundaries, having a respectful attitude
10 AM	Hike	All conversational skills
11 AM	Hike – 20 questions game: A person picks something (an object, persons, etc.) and others participant can ask them up to 20 yes or no questions to try to figure out what it is.	Problem solving, the difference between fact and opinion, playing a game, taking turns, introducing topics of interests to others, giving background information about a discussion
12 PM	Lunch	
1 PM	Strategy drawing: Draw a scene where you were confused about how someone was acting. Talk about this with the group. Now illustrate a strategy you could use for a situation like this in the future (asking a question, the difference between formal and informal behavior, etc.) Introduce HEAD (Happy voice, Eye contact, Alternating turns, Distance) and TGIF (Timing, Greeting, Initial Questions, Follow-up questions)	Individual social skills needs, HEAD, TGIF
2 PM	Hike	
3 PM	Stretch and return to campsite	
4 PM	Prepare dinner	Hygiene, Life skills (cooking)
5 PM	Eat dinner and clean up	Hygiene, cooperation
6 PM	Free time	Individual social skills interventions as needed, cooperation
7 PM	Group discussion: Social Skills: Share with group either one social interaction that went well today or an interaction you are confused about. Explain why the interaction went that way. What skills are needed for positive interactions? Anxiety: What is something you did that worried you today? What can we do when we feel anxious? Reflection: What have you learned so far that you can use in your everyday life? What are some goals you want to continue working on?	All social skills, anxiety
8 PM	Journaling/Drawing	Reflect on the discussion and the day
9 PM	Bedtime – Participants will leave the following morning	

Remaining Program: Reinforcing and Learning Skills

After the camping trip, the remaining 14 weeks of the art and wilderness therapy program will be designed to support and build on the social skills and other goals worked on during the camping trip. Sessions will range from 30 minutes to two hours in order to keep the children's attention without overwhelming them with information. These sessions will help participants generalize and better understand what they have learned during the trip. Also, it will allow time for them to express concerns about other social situations, build relationships with each other, and work on developing strategies appropriate for their goals.

Week 2 – Ceramic Container

Building the ceramics containers will provide many different benefits for the children in the program. First, the project will help them with their fine motor skills. Additionally, the activity will give them the opportunity to learn how to ask questions about learning new skills, cope with mistakes, and finally be able to create something functional. Choices and actions will have direct consequences that can affect the session helping children to shape and understand behavior. During the activity, participants will be able to talk to each other improving their skills. Different adaptations can be made as needed. For example, a child with sensory concerns may need to wear gloves. Children who are challenged by fine motor skills may need to use a mold or get assistance while creating their vessels.

Time	Activity	Target Skills
15 min	Talk about how to make a ceramic container out of coiling	Giving background information on a topic
45 min	Coil build a container	Asking a question when confused, conversational skills, dealing with making a mistake, taking turns Individual interventions as needed
15 min	Discussion: How did you use the material to build something that can be used? What were some challenges you had?	Discussion skills
15 min	Write/draw in journal	Reflection

Week 3 – Art Museum Visit

During this week, ceramics should be put in the kiln so they are ready to glaze. While the ceramics are being prepared, the children will take a trip to an art museum. There they will be able to utilize different social skills than they have used in other sessions. Visiting the art museums they will be directly involved using skills such as using formal behavior and interacting with strangers. These scenarios are not as readily available in a closed therapy setting as they would be taking a trip elsewhere. Additionally, the art museum gives the participants an opportunity to practice giving criticism and expressing their opinions. During this time, children will also have the opportunity to photograph their favorite work for reference to decorate their ceramics the following week. Some children may need different adaptations to navigate the museum. Also, other children with sensory concerns may need to wear headphones if the museum is too loud or a weighted vest if there is too much stimulation.

Time	Activity	Target Skills
15 min	Meet at museum Get introduced to museum guide – Talk about museum etiquette	Introducing yourself to someone new, trying something new
45 min	Tour of museum- Critic work, photograph favorite piece of work	Formal vs. informal behavior, giving criticism in a positive way, having a positive attitude, respecting other's opinions, keeping on a topic, taking turns in the conversation, giving background information in a discussion, strangers Individual interventions as needed
15 min	Discussion: What was your favorite piece of work? What was your least favorite piece? Why? How do you behave differently here than in the studio or other places?	Formal vs. informal behavior, giving criticism in a positive way, conversation skills
15 min	Write/draw in journal	Reflection

Week 4 – Museum Inspired Glazes

Children will be reminded of their museum visit and presented with the photographs taken from their favorite pieces of art. Then, they will pick out colors seen in the artwork they picked to make a color scheme for their ceramics. With these colors, they can make a design of their choice. While making the art children will run into the many common social skills supported by artmaking such as having to asking questions, dealing with making a mistake, and taking turns. Also they will learn the difference between using aspects of something they like and just copying it which can be generalized social situations. Some adaptations that may be needed are gloves for sensory concerns or paint brushes with different grips.

Time	Activity	Target Skills
10 min	Talk about last visit to the museum Give pictures of their favorite pieces of art	Giving background information on a topic
30 min	Use the color scheme from the artwork glaze their ceramics in a design of their choice	Asking a question when confused, conversational skills, dealing with making a mistake, taking turns, not copying Individual interventions as needed
15 min	Discussion: How did you use art to make something new? What is the difference between using an idea and copying?	Copying, discussion skills
15 min	Write/draw in journal	Reflection

Week 5 – Visit a Healing Garden

During this week, ceramics should be loaded into the kiln to finish the glazing process. This week's activities will take children out of the studio setting allowing them to further use their skills in multiple situations. The visit to the healing garden will expose them to a new environment with occupational tasks that will allow for them to work as a group to accomplish different goals around the garden. Working with an assigned partner, children will have to work on communicating, learning to compromise, and working together to complete a task. After this they will learn more about giving a person feedback by giving their partner two compliments and one piece of criticism. This will help to build on the criticizing skills they learned in the museum focusing it on more social interactions. This will be done concerning work done in the garden instead of artwork completed in the studio to avoid children to lose confidence or desire to do artwork due to the subjective critique of other children. The discussion will also work towards improving confidence by allowing each participant to share something they did well in the last week. Now that is later in the program, children may start engaging and applying their skills in more generalized situations. Giving them an opportunity to share this or another successful aspect of their week can help foster more support and encouragement in the therapy group.

Time	Activity	Target Skills
30 min.	Meet at a local garden and have staff discuss upkeep and parts of the garden	Getting to know someone new
45 min.	Work with an assigned partner on a task in the garden i.e. planting new seeds, watering, weeding,	Offering help, compromising, taking turns, trying something new Individual interventions as needed
30 min	Group discussion: Share with your partner two things they did well and one thing they can improve on. Share with the group something you did in the last week that went well.	Giving a compliment, giving criticism in a positive way, modesty, self-confidence
15 minute	Silent walk around gardens – Explore gardens and write/draw in journal	Having a respectful attitude, reflection

Week 6 – Make a Personal Healing Garden

Making a personal healing garden, the children will help to work with the children's previously developed skills. By planting the seeds in the ceramics containers they created children will be able to see how their art can also be functional. This can later serve as a reminder of what they accomplished and what they learned in their therapy sessions. Planting their own miniature garden opens up more opportunities. This will strengthen the occupational and recreational skills learned in the last therapy session. Growing plants, they children will have to learn about the needs of other living things incorporating consideration into their everyday lives. Also, it can give them an opportunity to keep the plants for themselves or a gift to someone else if they desire. During this activity children may need to wear gloves to help with sensory concerns. They may need support planting the seeds due to concerns with fine motor skills.

Time	Activity	Target Skills
15 min	Meet at art studio Briefly discuss past garden activity	Getting to know someone knew, trying something new
20 min	Pot soil, plant seeds in ceramic container made at last session, add some water	Trying something new, making choices
40 min	Discussion: Split into groups of three: What might we need to do to take care of the plants? What are somethings we might do to take care of ourselves? What have you done this week this week you are proud of? Each person shares with the whole group something someone else in their group did that they are proud of.	Hygiene, appropriate personal space, positioning in a conversation, tone of voice, initiating a conversation, keeping on topic, hold a conversation, active listening Individual interventions as needed
15 min	Write/draw in journal	Reflection

Week 7 – Kayaking

This session uses more recreational and wilderness therapy activities to incorporate target skills into the program. During this session the participants will get the opportunity to participate in kayaking activities. This will give them the opportunity to learn something more independently. As they will not have a partner like they did while canoeing, they may have to reach out to others more to initiate conversations and get assistance while they are learning. After they spend some time learning how to navigate in the kayaks, they will be challenged by playing games. These games should help with playing skills like winning, losing, and compromising. Also, there will be time where the children may make up or introduce their own games. This can help them introduce ideas, communicate effectively, and learn how to transfer these skills into daily living. These activities may have to be adapted based on specific children's needs. Children may need adaptations to fit their physical needs or to be put in a double kayak with an outdoor professional who could assist them.

Time	Activity	Target Skills
25 min	Meet at lake Get introduction to kayaking skills lesson	Getting to know someone knew, trying something new
20 min	Kayak practice	Asking a question when confused
40 min	Games: Races, ball tag, think of their own game	Asking someone to play, joining others in play, taking turns, playing a game, dealing with losing, dealing with winning, ending a play activity
20 min	Group discussion: What did you learn playing the kayaking games? What did you find challenging during the kayaking games? What is one skill you learned that you can use sometime in the next week?	Play skills, trying new things, taking turns in a conversation, keeping on topic, introducing a topic
15 min	Write/draw in journal	Reflection

Week 8 – Body Tracing

This week's activities are based on addressing personal space and other concerns directly. During this week children will take part in body tracing activities. This will force them to consider and address issues concerning personal space and how to work together taking turns and compromising. While a major goal of this session is to address personal space, if a child is too uncomfortable with children in their personal space the activity can be altered. A projector could be used to shine a light on the child and their shadow could be traced. If they had sensory concerns due to the light they child could use the template of person as an adaptation instead. After the children are done creating the tracing of their bodies, they will decorate the figures with their interests. This will help them learn about different ways to introduce and discuss topics of interests with others. It may allow for them to connect with other children who have similar interests in the group as well. Children may need grips for drawing mediums to help with this activity.

Time	Activity	Target Skills
5 min	Meet at art studio Introduce body tracing activity	Trying something new
15 min	Trace bodies	Personal space, taking turns, compromising, respecting personal boundaries, offering help Individual interventions as needed
20 min	Decorate inside of figures with interests	Introducing topics of interests to others Individual interventions as needed
20 min	Discussion: How did you feel sharing personal space? What are some personal boundaries we should respect? Explain the inside decorations of your figures.	Respecting personal boundaries, respecting others opinions, introducing topics of interests to others, taking turns in a conversation
15 min	Write/draw in journal	Reflection

Week 9 – Nature hike

On the nature hike, children will work on improving the conversational skills they have been learning throughout the experience. They will review to the Baker and Myle's HEAD and TGIF models to help them work on conversational skills. During the hike children will concentrate on trying to use these skills. All these skills can be easily included during the hike. Children may need to be reminded that why eye contact is important in some situations it may not always be appropriate. A good example of this is while hiking children should pay more attention to the trail than making eye contact. This activity is designed to serve as a reminder to support these social skills learned in earlier sessions. These previously learned skills will be accompanied by a new introduction of emotional skills. During the charades activity, the participants will be given an emotion, and they will have to act it out in front of the group who will guess the emotion. This will allow children to learn how to express emotions and also how to read emotions. While it is important to practice these skills, it is also necessary to consider any physical, emotional, or other needs children may have while hiking in the woods. Walking sticks, type of terrain, and other considerations can help provide support and an accessible environment to ensure that the skills can be focused on with the wilderness acting as an environmental aid and not an inhibitor.

Time	Activity	Target Skills
15 min	Meet at nature trail Review using your HEAD (Happy voice, Eye contact, Alternating turns, Distance) Review using TGIF (Timing, Greeting, Initial Questions, Follow-up questions)	Communication with others
20 min	Hike using HEAD and TGIF skills in conversation	All conversation skills
20 min	Emotion Charades: Participants are given an emotion they have to act out in front of the group. Individuals have to guess what emotion they are acting out.	Body language, recognizing feelings, understanding emotions of others, playing a game
20 min	Hike using HEAD and TGIF skills in conversation	All conversation skills
15 min	Group discussion: Think about the emotions from today's game. Identify a time when we might have these emotions. When might someone else have these emotions? What can do if we or someone else is experiencing these emotions?	Recognizing feelings, understanding emotions of others, cheering up a friend, expressing emotions
15 min	Write/draw in journal	Reflection

Week 10 – Printmaking

This week's activity has many potential benefits for children. First, the process of printmaking allows for children to practice reverse thinking skills. Reverse thinking is involved in the physical nature of printmaking itself; it can help practice general cognitive skills. During this process, children will have to engage in problem solving in order to make their prints. While printing, they will have the opportunity to socialize with each other improving communications skills. Additionally, they will expand upon their communication skills learning about and clarifying different figurative speech they may have heard. Once they complete all their prints, they will then participate in a print exchange. Each child will trade prints with other group members. This will leave them with at least three of their own prints to keep or give to someone else. This will help them learn about gift giving, sharing, and having a respectful attitude. The group discussion will help to cover challenges of the activity and what it was like to share with others. Drawing and printing tools may need to be adapted so children can participate fully. Children should be aided as needed, but in the least restrictive way.

Time	Activity	Target Skills
15 min	Explain what printmaking is and how to draw on the Styrofoam to make a print Explain the image will come out backwards. Explain figures of speech.	Giving background information on a topic, figure of speech
30 min	Give time to draw design on prints. Use mirrors if needed to understand reverse imagery. Prints will be about figures of speech, idioms, metaphors, etc. They can be how of the meaning as figurative speech of as plain language.	Asking a question when confused, conversational skills, dealing with making a mistake, taking turns, problem solving, figurative speech Individual interventions as needed
30 min	Print images – All children should print at least 8 images	Asking a question when confused, taking turns Individual interventions as needed
15 min	Trade prints – Every member of the group should get a print from each person	Conversational skills, having a respectful attitude, sharing
15 min	Discussion: What were some of the challenges of printing an image? What was it like to share your artwork with others? How can be figurative speech be confusing? What are some examples of figurative speech you know? What are some examples of figurative speech you are confused about?	Discussion skills
15 min	Write/draw in journal	Reflection

Week 11 – Ecoart

This week the participants will get to experience both art and wilderness activities. First, they will meet at an outdoor center where they will go on a hike. During the hike they will get practice independently starting and keeping conversations. At the site where they will make art, they will get to combine what they have learned about art and the outdoors in one activity. Participants will work in preassigned groups of two. By having most group work preassigned it can ensure that the children all work with different partners for activities. This can help them use their social skills conversing with more than one person. Speaking with more than one person they will have to work out how to interact with other people effectively and practice introducing their interests and other topics to multiple people. They will use these skills to work with their partner building rock sculpture and making mandalas out of found objects. Some children may need assistance with lifting and moving materials. Participants should not attempt to move anything that could harm them or may be very disruptive to nature.

Time	Activity	Target Skills
15 min	Meet at outdoor center Discuss making art out of nature	Trying something new
15 min	Hike to spot where art will be made	All conversational skills Individual interventions as needed
40 min	Make art out of nature in groups of two. Stack rocks for sculptures, make mandalas out of found object etc.	Discussion skills, compromising, sharing, taking turns, respecting personal boundaries Individual interventions as needed
15 min	Discussion: How did you work together to create a piece of art? In what ways did you have to think differently to create the art? What was challenges did you face working with a partner?	Conversational skills
15 min	Hike out of forest	All conversational skills Individual interventions as needed
15 min	Write/draw in journal	Reflection

Week 12 – Batik with natural dyes

During this session, children will get to work with both art and nature again. They will learn about making batik pieces with dies made from natural elements. These batiks designs will be based around the children's mood during that day. Batik which can be challenging to control may encourage children to work in a more abstract manor. This can help them further develop their creativity skills, work on their ability to problem solve, and encourage them to ask question. Also, the session will help to focus on children's understanding on their feelings. This will act as an introduction for the mural project discussing emotions that they will complete in the last three weeks of the therapy program. After illustrating their emotions they will be able to participate in discussion. The discussion will focus on discussing emotions and learning how to share them will others. This project may require the therapist to aid the participants more. If children cannot use hot wax they may be better using glue or other mediums as a resist, painting the dye onto the shirts, or using tie dye methods.

Time	Activity	Target Skills
15 min	Meet at studio and explain the process of batik. Discuss different emotions people have and ask children what they feel like today to prepare them to create their piece.	Giving background information on a topic, emotional skills
15 min	Complete sketch for batik project	Asking a question when confused, feelings, problem solving, trying something new
15 min	All children to apply wax resist to fabric : This piece will should be about their mood that day	Asking a question when confused, conversational skills, dealing with making a mistake, taking turns, feelings Individual interventions as needed
15 min	Apply dyes to fabric	Asking a question when confused, conversational skills, dealing with making a mistake, taking turns Individual interventions as needed
15 min	Iron wax out of fabric	Asking a question when confused, conversational skills, dealing with making a mistake, taking turns Individual interventions as needed
15 min	Discussion: How does this piece show your mood? What can we do with managing our emotions?	Discussion skills, Emotional skills
15 min	Write/draw in journal	Reflection

Week 13 – Mural

During this group activity, children will work as a group to create a mural. First, they will have time sketch images about the mural's theme "My emotions and others' emotions". This will help them learn more about their own feelings and improve their understanding of how others feel too. Also, it will allow them to work on teamwork. Doing sketches, children will have to think of how they will work together to make one collective mural. Designing the mural they will need to learn to accept criticism from others and address problems that arise to create a collective idea. Once this idea is formulated, children will need to collectively draw the mural. This will teach them to communicate with each other and respect boundaries of others. When their drawing is finished, they will begin painting. The painting process will further develop their social skills. Then, discussion will support what was learned in the activity. The group will talk about the feelings displayed on the mural and their own feeling. This will help enforce emotional awareness and understanding. Also, the group can talk about how they think the mural is progressing and how it is working in a group. This can allow for children to address concerns of group work. Discussing working as a group, the goal is for the children to work more cohesively by the end of the mural project and improve social skills. To participate in these activity children may need adapted paint brushes and other equipment to make the activity more accessible.

Time	Activity	Target Skills
15 min	Introduce a mural and painting. The idea behind the mural will be "My emotions and others emotions"	Giving background information on a topic, emotions
20 min	Sketch ideas: then as a group decide what will be on the mural	Accepting criticism, recognizing others emotions, recognizing feelings, problem solving
40 min	Draw mural on space as a group and then paint	All conversational skills, taking turns, respecting personal space, having a respectful attitude Individual interventions as needed
15 min	Discussion: How can we deal with some of the feelings we have shown on the mural? What are some feelings we have? How was it working as a group for this activity?	Conversational skills, to others when upset, recognizing feelings and others emotions
15 min	Write/draw in journal	Reflection

Week 14 – Mural

Children will continue to work on the mural activity during this week's meeting. The session will be largely focused on painting the mural. This will give children time to independently engage in social conversation practicing all their social interaction skills. While children are involved in their conversations and the project, naturally occurring opportunities will arise from the nature of the project for them to continue working on social interactions. They will need to practice taking turns, being respectful, minding personal space, and working as a group throughout the entire session. At the end of the session, they will participate in a discussion reflecting the theme of the project. They will have time to discuss some of the emotions they have had in the last week since they started the mural. This will help them learn about their own emotions and how to share their feelings with others. Also, they will have the opportunity to discuss how they handled and could handle their emotions. This will help them understand how to better react to their emotions. Finally, they will discuss how they think the project is going so far.

Time	Activity	Target Skills
5 min	Discuss mural from last week	Giving background information on a topic
50 min	Paint the mural	All conversational skills, taking turns, respecting personal space, having a respectful attitude Individual interventions as needed
15 min	Discussion: What are some feelings you had in the last week? How can you handle them? How do you feel about the mural so far?	Conversational skills, to others when upset, recognizing feelings and others emotions
15 min	Write/draw in journal	Reflection

Week 15 – Mural

During the final session, the children will continue working on the mural. During this activity, they will continue to build their social skills practiced in previous sessions. Also, they will be able to see the accomplishments made possible from working in a group once the mural is finished. Discussion of the mural and an overview of what they learned will help them analyze the therapy program. Mural discussion will focus on how they feel about the mural in general. Also, it will focus on how working as a group went for the children. Then, children will talk about challenges they faced either concerning the mural or throughout the program. They will also give an example of one thing they did successfully and how they can use these skills every day. This will help them generalize what they learned into other situations. At the end of the session children will complete self-evaluations again. The other evaluations will be sent out to the people who filled them out at the beginning of the program to look at progress.

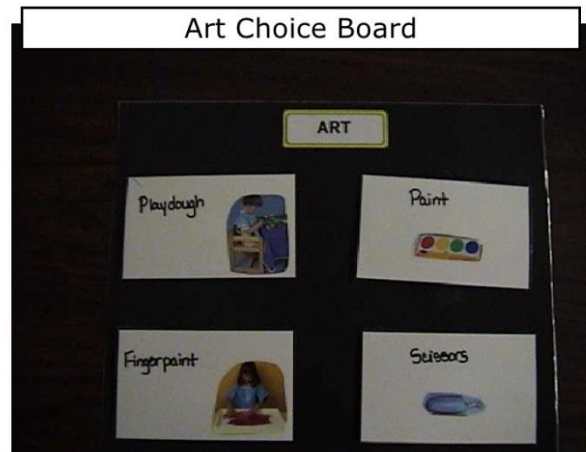
Time	Activity	Target Skills
5 min	Discuss mural from last week	Giving background information on a topic
50 min	Finish painting the mural	All conversational skills, taking turns, respecting personal space, having a respectful attitude Individual interventions as needed
25 min	Discussion: How do you feel about the mural? What are some benefits of working as a group? What are some challenges you faced? What can you do to use these skills every day? What is something you accomplished during the program?	Conversational skills, to others when upset, recognizing feelings and others emotions
15 min	Write/draw in journal	Reflection
15 min	Complete self-evaluations again to measure progress	

Additional Support for Activities:

Some children may require extra supports to help them with their projects. This could include many different types of support depending on the children's needs. Supports should be designed to aid children in the least restrictive way as possible. Visual support is often a very helpful for children with different needs such as social concerns. Some supports suggestions are listed below.

Choice Boards:

Creating a board with pictures that children can point at to select options could be useful for communication during session. This would allow for children to select supplies for specific activities. Cards on the board can be laminated for long term use. Also, they can be attached with Velcro so they can be used and changed.



Interactive Programs:

Interactive programs can also be used help children work on their projects. For example, Tesiboard offers a program that includes written, verbal, and visual instructions for building a coil pot. These supports could be used on assistive technology by children. The programs allow for children to hear, write about, read, and see the steps to building a coil pot. Children are able to go through this sequence in order or select another program which allows them to put the steps in order themselves. This may help them as well as other visual pictures of building a coil pot.

Sequencing activities:

Creating the project with each or certain steps completed can be helpful for children. This may help remind them what they are doing and how to do it allowing them to work more independently. While this can be helpful, children should be reminded and encouraged to make their own choices with their artwork. As this is a therapy program, work should focus more on project goals than aesthetic value. This could be helpful for activities such as the batik project.

Art Visual Activity Sequence



Visual Schedule

Visual schedules can offer support to all children in the program. These schedules can be formed in different ways depending on each child's needs. For example, children may want to have a schedule for the whole day, whole therapy session, or for each individual activity with each step laid out. These schedules can be put on the wall, in notebooks, and on the table where children are working. Velcro can be used to make cards reusable and once they are finished they can be put into a completed section or envelope. Schedules can include pictures, illustrations, and words depending on children's preferences.

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